

QUARTERLY PROGRESS REPORT

PROGRAMS TO IMPROVE DRUG CONTROL TECHNOLOGY (15A)

Following the instructions, please provide the information as indicated. Use the TAB key to move through the form. Status reports must be received by Office of Criminal Justice Assistance (OCJA) 30 days after completion of the first three months even if the project has not been implemented. Use additional sheets as necessary.

Projec	ct litle	Grant Aw	ard #		
Grant		Grant Per	riod From:	To:	
Telep	hone				
Repor	rt Prepared By	Title			
PROGI	RESS REPORT <u>N/A</u>				
IS THI	S A FINAL PROGRESS REPORT FO	OR THIS PROJECT?	<u>No</u>		
report l date of	idelines require the commencement of by letter to OCJA must outline steps to the award period, a second statement and redistribute the funds to other are	aken to initiate the project. If a promust be submitted to OCJA explain	oject is not opera	ational within 90 d	lays of the original start
<u>Yes</u>	Project commenced within 60 days of project and the reasons for delay as	· · · · · · · · · · · · · · · · · · ·	explain. Includ	le outline of steps t	taken to initiate the
<u>No</u>	Project commenced within 90 days of anticipated start date.	of award notification. If NO, please	explain why pr	oject has not comr	menced and the
Explain	ı				
PERSC	DNNEL				
Positio	ns Authorized in Grant Award Agreer	ment:			
Name (of Staff Member	Title			nt Funded of OT hours
				<u> </u>	

Yes	Have project personnel been hired in a timely manner? If NO, please explain below.
Yes	Have any of the job duties, as detailed in the Grant Award Agreement, changed? If YES, please explain below.
Yes	Are there any personnel issues which may affect the project objectives and activities. If YES, please explain below.
Explain:	
EQUIPMENT:	
PROPERTY REC	rd Agreement allows for equipment purchases, has any equipment been purchased? If YES, please list on the CORD provided with the Project Director's Manual. Copy as many sheets as necessary. Please detail below any tered in ordering/receiving grant equipment. Did you use the FALCON'S NEST program? If not, why? If yes, did you

GOALS & OBJECTIVES

receive satisfactory results through the program. Please elaborate.

Please indicate the status of each <u>Goal & Objective as outlined in your Grant Application</u>. Include the projections for each quarter versus the actual. Describe the quantity and type of drugs seized, number of clandestine laboratories discovered, and/or number of arrests. (This should be prepared on separate sheet and updated quarterly.)

Goal #1

Objective #1	Projected	1st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To
	Total					Date
Objective #2	Projected	1st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To
	Total					Date
Objective #3	Projected	1st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To
	Total					Date
Objective #4	Projected	1st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To
	Total					Date

Goal #2

Objective #1	Projected Total	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To Date

Objective #2	Projected Total	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To Date
Objective #3	Projected Total	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To Date
Objective #4	Projected Total	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	Total To Date

9 YES	9 NO	Did this project require contractual services?				
9 YES	9 NO	Was the contract put out for bid?				
What was the amount of the contract? How many years was the contract for?						
OPERATING EXPENSES:						
9 YES	9 NO	Are operating expenses being spent at the suggess	ted rate of 25% for each quarter? If not, why?			

NARRATIVE:

9 NO

9 YES

CONTRACTS:

Purpose area 15A is defined as "Developing programs to improve drug control technology, such as pretrial drug testing programs, programs which provide for the identification, assessment, referral to treatment, case management and monitoring of drug-dependent offenders, and enhancement of state and local forensic laboratories." This would include Pretrial/Probation/Parole Drug Testing; Statewide Urinalysis Testing; Treatment alternatives to street crimes; Forensic Laboratory Enhancement; process-oriented programs which include technology development, focused on better management of offenders and on providing better evidence related to criminal cases.

Were there unforseen expenditures for the project? What were they?

Some areas to consider when writing the narrative for this report.... Is this a new program? Was urinalysis testing performed? If so, provide statistics indicating number of tests performed, number referred to treatment, number of positive/negative results, whether pretrial/probationer/parolee, etc. What is the recidivism rate? Is this an increase or decrease?

If your program is for Forensic Laboratory Enhancement, describe how the enhancement has improved your situation. Provide statistics to prove the enhancement increased productivity and how.

Newspaper clippings or press releases should be attached.

EVALUATION:
Explain success or failure of project to date
If project has been unsuccessful, what measures will be taken to ensure success?

9 YES please explain v			riminal Justice Assistance is providing the air	
COMMENTS	:			
I CERTIFY THA	AT THIS REPORT	' IS ACCURATE AND IN ACCO	DRDANCE WITH OCJA POLICIES AND PR	OCEDURES.
Signati	ure - Project Direct	cor	Title	Date
REVIEWER'S C	OMMENTS (For G	OCJA use only)		
	Program Manag	ger Signature		Date